POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*uw*	68804	7/5/00
O.I.P.E. CLASSIFIER		8	7-10-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		7147/	8/21

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim Final	Original	Date
①	1	✔
	2	✔
	3	✔
	4	✔
	5	✔
	6	✔
	7	✔
	8	✔
	9	✔
	10	O
⑪	11	✔
	12	✔
	13	✔
	14	✔
⑮	15	✔
	16	✔
	17	✔
	18	✔
	19	✔
	20	✔
	21	✔
	22	✔
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	26	✔
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	28	✔
	29	✔
	30	✔
	31	✔
	32	✔
	33	✔
	34	✔
	35	O
	36	O
	37	✔
	38	✔
	39	✔
	40	✔
㊶	41	✔
	42	✔
	43	✔
	44	✔
	45	✔
	46	✔
	47	✔
	48	O
	49	O
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Claim Final	Original	Date
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Claim Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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